## CITY OF SANTA BARBARA PARKS AND RECREATION DEPARTMENT

## **Application for Appointment to**

Advisory Committee  (City employees are not eligible to serve on the Advisory Committee)	
Name:	
Home Address/City/Zip Code:	
Business Address/City/Zip Code: _	
Home Telephone Number:	Business Phone Number:
Facsimile Number:	E-mail Address:
Who will you represent? (An organiza	ntion, community at large, etc.)
EXPERIENCE/BACKGROUND	
Education:	
Memberships in Organizations:	
If appointed as an Advisory Comnoffer the Committee:	nittee member, please share what expertise you wil
Have you served on this committee	or any City Committee in the past?   Yes   No
If so, please identify the Committee	and the dates you served:
Signature	Date